# **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat Number :	ion 2022	C0722			Repor Filed		CANDI	DATE	✓	co	OMMITTEE		LOBE	BYIST			
Name of Filing	Committee, Candida	ate or Lo	obbyist:		LISA B	-	)LA										
Street Address:																	
City:							State:				Zip Cod	<b>Zip Code:</b> 18042					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- 2. PRIMARY			30 D PRIM	DAY I 1ARY	POST- 3. <b>X</b>		AMENDME REPORT?	AMENDMENT REPORT?		No	$\checkmark$			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE- 5. ELECTION			30 D ELEC	DAY I CTION	POST-	6.		TERMINA REPORT?	TION	Yes	No	$\checkmark$		
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022				NG METH				PAPER		$\checkmark$	DISKE	TTE		
Name of Office	Sought by Candidat	te:					DATE O	OF ELE	СТІОІ	N	District Number	Office Code	Par	ty Code	County Code		
							мо	DAY	YE	AR		10000	DEN	1			
							11		8	2022		(SEE INS	TRUCTIO	ONS FOR	CODES)		
Summary of Receipts and MO DAY YEAR							мо	DAY	YE	AR	FOF	R OFFIC	e use	ONLY			
Expenditures	s from:		5 3	2	022 <b>1</b>	Ю	6	5	6	2022							
A. Amount Bro	ought Forward Fron	n Last R	eport			4	5			0.00							
B. Total Monet	ary Contributions A	And Rec	eipts (Fron	n Sche	dule I)	9	\$ 0.00										
C. Total Funds	Available (Sum Of	Lines A	and B)			9	\$			0.00							
D. Total Expen	ditures (From Sche	edule II	[)			5	\$			0.00							
E. Ending Cash	n Balance (Subtract	: Line D	From Line	C)			\$			0.00							
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)		\$			0.00							
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		9	\$			0.00							
				AFF	IDAV	IT SI	ECTION										
	s a Committee repo	•	-					• •		-	-						
I swear (or affirm correct and compl	) that this report, incl lete.	uding the	attached sc	hedule	s filed on	i papei	r or by elect	tronic m	edium,	are to	the best of	my know	ledge	and beli	ef , true		
Sworn to and sub	scribed before me this day of		20						Si	gnaturo	e of Person	Submitt	ng Rep	ort			
	Signatu	re				_					Printe	ed Name					
My Commission E	-	-									Email						
	мо	D	AY	YR				Are	ea Code	9	Daytime	e Telepho	one Nu	mber			
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nittee, O	Candi	date shall	sign he	ere.								
No 320) as amend		ny knowle	edge and beli	ief this	political	comr	nittee has n	not viola	ted any	, provis	ions of the	act of Ju	ne 3,19	937 (P.L	. 1333,		
Sworn to and subse	cribed before me this day of		20							s	ignature of	Candida	te				
						_					Printed	Name					
My Commission Ex	Signature pires					_					Email						
	мо	D/	AY	YR	1	_		Area	Code		Day	ytime Te	lephon	e Numb	er		

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** LISA BOSCOLA From: <u>5/3/2022</u> **To:** 6/6/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Re	porting	Period			
F			Fro	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)			4)					
							Γ	PAGE TOTAL

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

\$

0.00

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)								
Name of Filing Committee or Candidat	e		Rep Fror	orting P	eriod	Τα	):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	0.00

# PART C Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting	Period	Reporting Period				
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committe	ee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
							-	PAGE TOTAL	
Enter Grand Total of Part C on S	chedule I, Detail	led Summary Pa	age, Sectio	n 3.			\$	0.00	

# PART D ALL OTHER CONTRIBUTIONS

### OVER \$250.00

## Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period			
	From:	То:		

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							\$	0.00

I

# PART E **OTHER RECEIPTS**

**REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.** Use this Part to report refunds received, interest earned, returned checks and

### prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			ing Perio	od				
F			From:	From: To:					
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address	Mailing Address						\$		0.00
City	State	Zip Code (	Plus 4)						
Receipt Description	•						-		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ſAL
		iiai y i uge,	Section				\$		0.00

# SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

### USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD.

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
LISA BOSCOLA	From:	<u>5/3/2022</u> <b>To:</b>	<u>6/6/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 3		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

## VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R			Reporting Period					
	From:			То:				
				DATE		АМС	DUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address	Mailing Address					\$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detai Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	5	0.00	

### SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting P	eriod				
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business					Zip Code(Plus 4)			ption of	f Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate						
	From			То:			
				DATE			AMOUNT
To Whom Paid				DAY	YEAR		
Mailing Address						\$	0.00
City State Zip Code (Plus 4)			Descrij	otion of Exp	penditure		
Enter Grand Total of Expenditures					PAGE TOTAL		
	on Page 1, Report C	over Page, Item L				\$	0.00